6	PErcy
אוע	0 2 2000
PATER	TRAILE

N O S	<u> </u>		t.					
					Com	olete i	f Known	
TRI	IR. S. C.	Application Num	ber	09/699,503				
	TRANSMITTAL F	ORN	Filing Date			October 31, 2000		
	(to be used for all correspondence	after in	itial filing)	First Named Inventor Examiner Name Group Art Unit Attorney Docket Number			CUSHING et al.	
	•						G. R. Akers	
							3624	
	Total Number of Pages in	This S	Submission				2566-0106	
		ENCL	OSURES (chec	k all that apply)		· · · · · · · · · · · · · · · · · · ·	
X Fee Transmittal Form			Assignment Pap			Allowance		
	X Fee Attached		Drawing(s)		Appeal Communication to Board of Appeals and Interferences			
X	Amendment		Licensing-relate	Ш				
	After Final		Petition			Anne	Appeal Communication to	
	Declaration under Rule 312			Petition to Convert to a Provisional Application		Grou	up (Appeal Notice, Brief, ly Brief)	
X	Extension of Time Request		Power of Attorney, Revocation Change of Correspondence Address Terminal Disclaimer Request for Refund			Prop	orietary Information	
	Express Abandonment Request					State	us Letter	
	Information Disclosure Statement					Othe	er Enclosure(s) (please	
	Certified Copy of Priority Document(s)				Ģ	iden	tily pelous V	
	Response to Missing Parts/ Incomplete Application		CD, Number of	CD(s)			er Enclosure(s) (please tilly believe)	
	Response to Missing Parts under 37 CFR 1.52 or 1.53		·	REMARKS:			-000	

SUBMITTED BY			Complete (if applicable)			
NAME AND REG. NUMBER	Brian A. Tollefson, Reg. No. 46,338					
SIGNATURE	Bith	DATE	6/2/03	DEPOSIT ACCOUNT USER ID 02-2135		

		Complete if Known				
		Application Number	09/699,503			
OIP EEE TRANSMITTAL		Filing Date	October 31, 2000			
for FY 2003	First Named Inventor	CUSHING et al.				
JUN U 2 ZUUS		Examiner Name	G. R. Akers			
		Group Art Unit	3624			
THANK!)55.00	Attorney Docket Number	2566-106			

METHOD OF PAYMENT (check one)	FEE (CALCU	LATION (continued)	
The Commissioner is hereby authorized to charge		DITION	IAL FEES	
additional fees and credit any overpayment to	Fee	Fee		
Deposit Account Number 02-2135 in the name of	Code	Paid	Fee Description	Fee Paid
Rothwell, Figg, Ernst & Manbeck	2051	65	Surcharge - late filing fee or oath	[]
	2052	25	Surcharge - late provisional filing fee	į į
Characan Additional Eco Beautred Under			or cover sheet	•
Charge any Additional Fee Required Under	1053	130	Non-English specification	[]
37 CFR 1.16 and 1.17	1812	2,520	For filing a request for reexamination	i. i
	1804	920	Requesting publication of SIR	i
X Applicant claims small entity status.			prior to Examiner action	γ_{λ}
	1805	1,840*	Requesting publication of SIR .	
2. X Payment Enclosed:			after Examiner action	
	2251	55	Extension for reply within first month	485 5
X Check	2252	205	Extension for reply within second month	
Credit Card	2253	465	Extension for reply within third month	
	2254	725	Extension for reply within fourth month	A P b. C
FEE CALCULATION	2255	985	Extension for reply within fifth month	
	2401	160	Notice of Appeal	2000 - 10
4 FILING FEE	2402	160	Filing a brief in support of an appeal	
1. FILING FEE	2403	150	Request for Oral Hearing	(V)
Fee Fee	1451	1,510	Petition to institute a public use proceeding	1 40
Code \$ Fee Description Fee Paid	2452	55	Petition to revive -unavoidable	
2001 375 Utility filing fee []	2453	650	Petition to revive - unintentional	[]
2002 165 Design Filing Fee []	2501	650	Utility issue fee (or reissue)	[]
2003 260 Plant Filing Fee []	2502	235	Design issue fee	[]
2004 375 Reissue Filing Fee []	2503	315	Plant issue fee	[1
2005 80 Provisional Filing Fee []	1460	130	Petitions to the Commissioner	[]
	1807	- 50	Processing fee under 37 CFR 1.17(q)	[]
SUBTOTAL \$	1806	180	Submission of Information Disclosure Statement	
2. CLAIMS	8021	40	Recording each patent assignment per property (times number of properties)	[]
Extra	2809	375	Filing a submission after final rejection	r 1
		0,0	(37 CFR .129(a))	
Claims Fee Fee Paid Total Claims [18] - 20** = [0] x \$9 = []	2810	375	For each additional invention to be	1 1
Independent		• • •	examined (37 CFR 1.129(b))	
Claims [2] - 3^{**} = [0] x 42 = [2801	375	Request for Continued Examination (RCE)	1
Multiple Dependent Claims + 140 = []	1802	900	Request for expedited examination	i i
Watthe Dependent Claims . 140 []			of a design application	• •
**or number previously paid, if greater;	1504	300	Publication fee for early, voluntary, or	f 1
or number providusty paid, it greater,			normal publication	•
SUBTOTAL \$	1505	300	Publication fee for republication	1
30BIOIAL \$	1455	200	Filing an application for patent term adjustment	i i
	1456	400	Request for reinstatement of term reduced	i i
	Other for	ee (specif		į
	* Redu	ced by Ba	sic Filing Fee Paid SUBTOTAL	\$55.00

SUBMITTED BY				Complete (if applicable)	
NAME AND REG. NUMBER Brian A. Tollefson, Reg. No. 46,338					
SIGNATURE	Brta	DATE	6/2/03	DEPOSIT ACCOUNT USER ID	